

STAFF

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(1) MONTH/YEAR		(3) LOCATION WHERE EXPENSES WERE INCURRED	(4) LODGING	(5) MEALS			(6) INCIDENT- TALS	(7) TRANSPORTATION					(8) BUSINESS EXPENSE	(9) TOTAL EXPENSES FOR DAY
(2)				BREAK- FAST	LUNCH	O.T.,L/T, N/C, RELO. OR DINNER		(A) COST OF TRANS.	(B) TYPE USED	(C) CARFARE, TOLLS, PARKING	(D) PRIVATE CAR USE			
DATE	TIME										MILES	AMOUNT		
											\$0.00		\$0.00	
3/18	1130 2000	Sac/SF/Oakland/Sac			\$6.58				\$43.00	185	\$101.75		\$151.33	
											\$0.00		\$0.00	
											\$0.00		\$0.00	
											\$0.00		\$0.00	
											\$0.00		\$0.00	
											\$0.00		\$0.00	
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											\$0.00		\$0.00	
											\$0.00		\$0.00	
											\$0.00		\$0.00	
											\$0.00		\$0.00	
(10) SUBTOTALS					\$6.58				\$43.00	?	101.75		\$151.33	

SUBTOTALS

CLAIM TOTAL	\$	\$151.33
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Meeting with Bank of America to finalize curriculum for the Survive and Thrive DURING Tough Times state-wide tour - San Francisco

Meeting with Ian Kim, Ella Baker Center, and Carla Din, Apollo Alliance, regarding the California Green Corps - Oakland

142) NORMAL WORK HOURS

(13) PRIVATE VEHICLE LICENSE NUMBER

4ybd289

(14) MILEAGE RATE CLAIMED

AGENCY ACCOUNTING OFFICE
USE ONLY

PAID BY REVOLVING FUND CHECK NUMBER

\$0.55

THE CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If private-owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753, and 0754 pertaining to vehicle safety and seat belt usage.

(15) CLAIMANT'S SIGNATURE

DATE _____

(16) SIGNATURE OF OFFICER APPROVING TRAVEL AND PAYMENT

DATE _____

(17) SPECIAL EXPENSE AUTHORIZATION - SIGNATURE and TITLE (See Item 17¹ on reverse)

DATE _____